MASSACHUSETTS DEPARTMENT OF REVENUE TAXPAYER'S CONSENT TO APPLICATION OR ESCROW OF OFFER IN SETTLEMENT DEPOSIT

Dear T	Taxpayer(s):				
62C.3	7A.1(4)(c), you a	e hereby requested	Chapter 62C, Section 37A, and to make a decision as to the caxt to either Option A or Option	disposition of your Offer	
[]	<u>OPTION A</u> :	The DOR shall ap	ll apply the deposit to reduce my liability as of the fer, <u>or</u> ,		
[]	OPTION B:	escrow account to	Il negotiate the deposit and place the proceeds in an nt to be held awaiting further instructions from the the Offer has been processed.		
was fil	led. It is to your a of a portion of th	dvantage to apply t	vill be credited to your accour the deposit funds to the liabili lties, even if the Offer is rejec		
	y. However, if th		ccepted, the deposit will auton DOR will notify you of the re		
withdr want to applied	aw your Offer be he deposit to be a d to reduce your l	fore action is taken pplied to the liabilit iability, it will be ef	ust do so in writing. If you hat on it by the DOR, you must sty, or it will be refunded to you ffective as of the original receitten acknowledgement of the	specify in writing that you bu. When the deposit is sipt date of the deposit. If you	
Name	of Taxpayer(s) _				
Addre	SS		Town	Zip	
-	yer's Signature/D		Spouse's Signature/D		
Please	complete and ret	urn this form and ar	ny accompanying materials to	:	
	tment of Revenue	, Taxpayer Service	Division		

Collections Bureau
Offer in Settlement Unit
Attn: Director
P.O. Box 7021
Boston, MA 02204
(617) 887-6065
Revised 6/3/03